

2017 Donation Form



Yes! I want to empower HR professionals to build inclusive organizations by making a tax-deductible donation of:

- \$30 \$50 \$100 \$250 \$500 \$1,000 OTHER: _____

1. Donation Information

Individual Donation _____ SHRM ID: _____
Full Name with Credentials

Monthly donation: I wish to make this a monthly donation.

Team Empower: I will join Team Empower by donating \$30 or more to the SHRM Foundation and pledging to support the SHRM Foundation's inclusion challenges in 2017.

Leadership Circle: I will join the Leadership Circle by donating \$1,000 or more this year and pledging to give \$1,000 or more in both of the next two years.

Recognition Credits: I wish to give credit for my donation to my SHRM Chapter & State Council.

Chapter Name: _____ State: _____ Chapter ID: _____

State Council Name: _____

State Council Donation _____
State Council Name

Chapter Donation _____ Chapter ID: _____
Chapter Name

Student Chapter Donation _____ Chapter ID: _____
Student Chapter Name

Organization/Company Donation _____
Organization/Company Name

Would you like to dedicate this donation? Gift in honor Gift in memory Gift in lieu of speakers fee

Honored / Memorialized Individual / Speaker and event

Address to send notification of your donation

2. Donor Information

Donor Name _____
SHRM ID

Organization _____
Today's Date

Address

City _____
State _____
Zip

Daytime Phone Number _____
Email address

3. Payment Information

Check enclosed payable to SHRM Foundation **Charge my credit card:** VISA MasterCard American Express

Name on Card

Credit Card Number _____
Expiration Date _____
CVV Code

Signature _____
Date

Make your secure online donation at: SHRMFoundation.org/DONATE

Please mail this form with your contribution to the secure lockbox at: SHRM Foundation, P.O. Box 79116, Baltimore, MD 21279-0116

The SHRM Foundation is a 501(c)(3) nonprofit charity. Your gift is tax-deductible to the full extent of current law.